

**Electronic Filing System (EFS) Data**  
**Electronic Patent Application Submission**  
**USPTO Use Only**

EFS ID: 13948  
Application ID: 09683824  
Title of Invention: METHOD FOR ADJUSTING A  
MICROSCOPE AND MICROSCOPE  
WITH A DEVICE FOR ADJUSTING A  
LIGHT BEAM  
First Named Inventor: HOLGER BIRK  
Domestic/Foreign Application: Domestic Application  
Filing Date: null  
Effective Receipt Date: 2002-02-20  
Submission Type: Utility Patent Filing  
Filing Type: new-utility  
Confirmation Number: 0  
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Digital Certificate Holder: cn=Maria A. Eliseev, ou=Registered Attorneys, ou=Patent and  
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Government, c=US  
Certificate Message Digest: 32f+xrCZe6s8J4Ddw8veTg==  
Total Fees Authorized: \$866.0  
Payment Category: DA - Deposit Account  
Deposit Account Number: 500369  
Deposit Account Name: Maria Eliseeva

# TRANSMITTAL FORM

Electronic Version 1.0.3

Stylesheet Version: 1.0

Submission Type: Utility Patent  
Filing

Attorney Docket  
Number:

21295-  
42



## METHOD FOR ADJUSTING A MICROSCOPE AND MICROSCOPE WITH A DEVICE FOR ADJUSTING A LIGHT BEAM

First Named Inventor: Dr. HOLGER BIRK

### SUBMITTED BY

Name: MARIA M ELISEEVA

Registration Number: 43328

Electronic Signature Mark: Maria  
Eliseeva

Date Signed: 20020220

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*I, the undersigned, certify that I have viewed a display of document(s) being electronically submitted to the United States Patent and Trademark Office, using either the USPTO provided style sheet or software, and that this is the document(s) I intend for initiation or further prosecution of a patent application noted in the submission. This document(s) will become part of the official electronic record at the USPTO.*

Attached Files:

declaration

DecSh1.tif



**Comments:**

[illegible]

BRFG Docket No.: 21295/42  
Client Ref.: H5381US

## **COMBINED DECLARATION AND POWER OF ATTORNEY**

As a below named inventors, hereby declare that:

### **TYPE OF DECLARATION**

This declaration is for a utility patent application.

### **INVENTORSHIP IDENTIFICATION**

My residence, post office address and citizenship are as stated below, next to my name. I believe that I am an original, first and joint inventor of the subject matter that is claimed, and for which patent is sought on the invention entitled:

### **TITLE OF INVENTION**

METHOD FOR ADJUSTING A MICROSCOPE AND MICROSCOPE WITH A  
DEVICE FOR ADJUSTING A LIGHT BEAM

### **SPECIFICATION IDENTIFICATION**

The specification

☐ is attached hereto.

☒ was filed on

and was amended on

and has U.S. Application Number

### **ACKNOWLEDGMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR**

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information, which is material to patentability as defined in 37, Code of Federal Regulations, Section 1.56.

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**POWER OF ATTORNEY**

I hereby appoint the following practitioner(s) to prosecute this application and transact business in the Patent and Trademark Office connected therewith.

**APPOINTED PRACTITIONER(S)**

Brian L. Michaelis, Reg. No. 34,221  
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### DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and if such willful false statements may jeopardize the validity of the application or any patent issued thereon.

### SIGNATURE(S)

Inventor: Dr. Holger Birk

Inventor's signature: Holger Birk Date 2/18/02  
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Inventor's signature: Dr. Johan Engelhardt Date 02/19/02  
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# FEE TRANSMITTAL

Electronic Version 1.1.0

Stylesheet Version: 1.0

*Patent fees are subject to annual revisions on or about October 1st of each year.*

Large Entity

**TOTAL FEES AUTHORIZED: \$ 866**

The commissioner is hereby authorized to charge indicated processing and/or publication fees and credit any overpayments to:

Deposit Account Number: 500369

Deposit Account Name: Brown Rudnick Freed & Gesmer



## SUBMITTED BY

Authorized Name: Maria Eliseeva

Electronic Signature Mark: Maria Eliseeva

Date Signed: 20020220

## BASIC FILING FEE

Fee Description	Fee Code	Fee Paid
Utility Filing Fee	101	\$ 740

Subtotal For Basic Filing Fee: \$ 740

## EXTRA CLAIM FEES

	Fee Code	Fee	Extra Claims	Fee Paid
Total Claims: 27	103	\$ 18	7	\$ 126
Independent Claims: 2	102	\$ 84	0	\$ 0

Subtotal For Extra Claims Fees: \$ 126